

HYPNOTISM.

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Reprinted from the Dublin Journal of Medical Science—May, 1891.



DUBLIN:

PRINTED FOR THE AUTHOR

BY JOHN FALCONER, 53 UPPER SACKVILLE-STREET.

1891.



HYPNOTISM.^a



It occurs to me that, as the practical knowledge of hypnotism is very limited in Ireland, it may be interesting to the members of the Royal Academy of Medicine in Ireland to hear a brief account of what I have seen with my own eyes of this strange subject.

For the last couple of years I read a good deal on this topic, mainly owing to the solicitations of a friend—a very learned clergyman—who was attracted by the startling psychological problems it involved touching vital questions of moral responsibility. My studies included the works of Dr. Lloyd Tuckey,^b of London; Drs. Liébault^c and Bernheim,^d of Nancy; Drs. Fontan, Ségard,^e and others; and I ultimately was led, at the commencement of last year, to the conclusion that the statements made concerning hypnotism were either astounding facts or most audacious falsehoods.

Being anxious to set my mind at rest, I proceeded to Nancy last June, and placed myself under the tuition of Drs. Liébault and Bernheim. Later on I came to Paris, and there followed the clinical instructions of Dr. Luys, at the Charité, Dr. Auguste Voisin, and Dr. Guinon, the Chef de Clinique of M. Charcot, at the Salpêtrière.

I may now state at once that, after somewhat extended, and, I hope, unprejudiced study, I arrived at the conclusion that hypnotism is a reality—a most extraordinary and interesting development of neurological and psychological science, and in certain cases a potent

^a Read before the Medical Section of the Royal Academy of Medicine in Ireland on Friday, April 17th, 1891.

^b *Psycho-Therapeutics*. By C. Lloyd Tuckey, M.D. London: Baillière, Tindall, and Cox. 1890.

^c *Le Sommeil Provoqué*. Par A. A. Liébault. Paris: Octave Doin. 1889.

^d *De la Suggestion, &c.* Par le Dr. Bernheim. Octave Doin. 1888.

^e *Éléments de Médecine Suggestive*. Par le Dr. Fontan et le Dr. Ségard. Paris: Octave Doin. 1887.

aid to therapeutics. I am fully prepared for and reconciled to the probability that the statements I am about to make may be received with incredulity, and even derision. Had I heard them myself a year ago, I think I should have been very sceptical. However, that is of no moment—*Magna est veritas et prævalebunt*.

I do not intend on the present occasion to enter upon any full account of the history of hypnotism—such may be found in all the standard treatises bearing on it, and notably in a clever article by Dr. Campbell Clark, in the number of the *National Review* for February of this year. The subject is still more exhaustively treated in the first chapter of Dr. Bernheim's last work, published this year—"Études Nouvelles sur l'Hypnotisme, &c."^a Indeed, the very short period at my command at present renders it impossible for me to do more than barely touch the subject of hypnotism. As regards history, suffice it to say that, while known and practised, after a fashion, in very ancient times, hypnotism was prominently revived by Mesmer, who flourished at the end of the last and commencement of this century. Later, some fifty years ago, Mr. Braid, a Manchester surgeon, re-introduced it, and showed that it might in some instances be made practically useful in medicine. Braid has the merit of foreshadowing its true application by combining with mesmeric sleep the manipulation of the diseased parts—the first effort to combine *suggestion* with artificial sleep. Still later hypnotism was again brought to the front by Dr. Ambroise Liébault, of Nancy, to whom we are indebted for its present position, and for its establishment on a solid basis of usefulness by combination with systematic *verbal suggestion*. Modern hypnotism is no longer a medical curiosity, a blind effort at cure without *rationale*; but it is the application of *suggestion* during provoked sleep, based on an extended and successful experience.

I think I cannot do better than relate here M. Liébault's story, as I heard it from himself, of how he came to combine hypnotism and suggestion, and thereby to revolutionise the treatment of a large class of ailments. I think at the present time it would be difficult, if not impossible, to set limits to the range of its applicability and contingent utility. M. Liébault told me that as a young practitioner he was often forcibly struck by the manifest effect on patients which he observed to follow the physician's expression

^a Hypnotisme, Suggestion, Psycho-Thérapie. Études Nouvelles. Par le Dr. Bernheim. Paris : Octave Doin. 1891.

of a decided opinion, favourable or the reverse. This he rightly attributed to the power of the mind and nervous system upon the physical condition. None of us are ignorant of it. Oftentimes we see patients die of fright, whilst others are saved because they are courageous and determined to recover if they can. Pondering over this problem, Liébault came to seek in what way he could apply *suggestion of cure* with the utmost possible advantage. After many trials he made the discovery that in "induced sleep"—hypnotism, in other words—when the personality of the subject is partially or nearly completely extinguished, and the imagination highly exalted, suggestion becomes infinitely more powerful than in the waking state. This was his point of departure—this is the *essence* of modern hypnotism.

The careful study of his remarkable essay, "*Le Sommeil Provoqué*," published in 1889, will amply repay all unbiassed students. In it he summarises the result of all his published contributions to the subject, which date back to the year 1868.

Despite ridicule and neglect, Liébault, with the earnestness of a true scientist, and the concentrated disinterested devotion of his compatriots, worked and worked until he proved to many observers that he had struck upon a mine of wealth in therapeutics, and his method came to be tested and adopted by numbers in France and elsewhere. His most remarkable pupil, Dr. Henri Bernheim, Physician to the Hôpital Civil at Nancy, and Professor of the Faculty of Medicine there, took the matter up, and utilised his vast field of observation. The result of his labours is embodied in his exhaustive work, "*De la Suggestion, et de ses Applications à la Thérapeutique*," published in 1888, and also in his later essay already quoted. The study and practice of hypnotism has gradually spread in France and elsewhere, and now reckons amongst its advocates many illustrious names in Germany, Belgium, Holland, Switzerland, America, England, and elsewhere. It seems to me that it is full time for us in Ireland to investigate the matter.

Now, to proceed, let us suppose ourselves in M. Liébault's consulting rooms—Dispensary in fact—in the Rue Bellevue, at Nancy.

From seven in the morning till noon he works, or rather, I should say, used to work, for since the time of my visit he has retired. He is a bright, intelligent, old gentleman—simple, kindly in manner, and sympathetic with all his patients, who stream in to seek his aid, mostly when all other means of cure have failed.

There were to be seen many phases of disease—chest affections, heart diseases, dyspepsia in all its phases, uterine ailments, diseases of the nervous system, ataxy, paralysis agitans, writer's cramp, neuralgia, hysteria—men and women of all ages, and many children.

His procedure was as follows:—He placed the patients in turn in an easy reclining chair, with their backs to the light, questioned them closely as to their symptoms and sufferings, with a *naïveté* quite astonishing to anyone accustomed to separate sexes and ages, and forthwith hypnotised them. His method is to make the subject stare at two of his fingers, which he places a few inches from their eyes, and as soon as the eyes begin to water, and the pupils to dilate, he suggests "sleep" in an emphatic manner, and then closes their eyelids, gently pressing the eyeballs.

In *nearly every* case, sooner or later, the patients passed into sleep, of very various degrees, no doubt; but to all he *suggested verbally* that on awakening their symptoms would be improved, at the same time rubbing strongly the seat of disease. In ten minutes or less he awakened them by fanning the face; and when they were aroused, mostly very cold and disposed to rigor, all stated that their symptoms, whatever they may have been, were improved, and they went their way, returning in one or more days as he directed. I had the opportunity of closely interrogating these patients, and found all had the same story to tell—namely, that after Dr. Liébault's course of treatment—short or long as he required—they were either cured or relieved. Many of the cases were quite incurable, and relief only was possible; in others the cure was averred to be complete and lasting. Such was M. Liébault's clinique. It would be impossible to conceive anything more free from the faintest attempt at deception or clap-trap of any kind. The rooms were very plain, the doctor the impersonation of simple truth, and the patients for the most part of a humble class—the least likely to expend their time unless satisfied with the value received.

A few remarks seem needful here. As I stated, nearly all succumbed to hypnosis—fully 75 per cent. A few proved to be not hypnotisable. The cases in which I saw M. Liébault fail were women and children. In these instances it seemed impossible to fix the gaze, attention, and consent. Whenever these points were attainable the patient slept. As I observed already, the degree of hypnosis was variable. M. Liébault classifies it into six stages,

which I may relate here, as his division seems very simple and practical, although not adopted in all details by Bernheim and others:—

1st degree—Light sleep.

2nd degree—Deep sleep. In this, sensibility is so lost that a needle puncture or touch to the conjunctiva does not arouse.

3rd degree—Deep sleep, with the possibility of suggesting either catalepsy or automatic movement.

4th degree—Still deeper sleep, in which the patient loses relation with all the surroundings, and does not respond to any voice *except that of the hypnotiser*.

5th and 6th degrees—Different degrees of somnambulism, in which the patient becomes more or less completely an automaton in the hands of the hypnotiser, and when wakened is totally oblivious of all that has been said or done at the bidding of the operator. Interesting as all these gradations of hypnosis are, especially from a psychological point of view, I cannot now enter upon them. Suffice it to say that in all *suggestion* is potent for therapeutics.

I shall not attempt to theorise or offer any explanation of this extraordinary fact. I have long since arrived at that period of mental development—for good or ill—at which I have ceased to attempt explanation. If a body set free falls to the earth, I call it, as I have been taught, *gravitation*. That word expresses a fact but explains nothing. I know that quinine lowers temperature and cures many neuralgias, that aloes purges, and opium stops the purging. Of the why and wherefore I know nothing. So also I must acknowledge of the power of suggestion in hypnosis.

If I must theorise on this point I would do so by analogy. Quinine alters the circulation in the brain and in the nervous system, and thus, I presume, alters the condition of the brain, which is necessary for the sensation of pain, &c. May it not be so of hypnosis? Obviously this theory merely puts back the difficulty a stage. Explanation there is none; no more than of the countless processes of physical science which we see pass before us daily. It seems to me more profitable, with our present means of knowledge, to observe and treasure up facts, especially when they help us to cure or relieve. Behind all physical phenomena is the Almighty Power that works and directs them, and teaches us, if we are wise, how little we know beyond mere ultimate facts and the generalisation therefrom.

I feel confident that so candid and genuine a lover of science as M. Liébault will not be displeased with me if I make a gentle criticism on his practice. I think he relies too completely on hypnotism in the treatment of disease, and too rarely accepts any other aid from our extensive medical armamentarium. This is explicable in a fashion. He has done so much to bring forward hypnotism, and to demonstrate its power, that he, as it were, rides his hobby a trifle too hard.

So much for my visit to M. Liébault at the Rue Bellevue. I am glad, indeed, that I was in time to see his successful practice there, which I can never forget or fail to appreciate at its high value.

Now, let us visit Dr. Bernheim at the Hôpital Civil. He is one of the most trusted and prominent medical men in Nancy, and Physician to the great hospital of that city. He is not young—certainly, as old as I am. Ten years ago he was an absolute sceptic regarding hypnotism and suggestion, but was induced to try it after seeing the strange and unexpected cures worked by his friend Liébault. Now, after making 10,000 experiments, he has become a firm believer in its efficacy in certain cases, and he uses it on a vast scale.

His practice differs from that of Liébault in this, that he merely adds hypnotism as an adjunct to other therapeutic agencies. Let us follow him during the visit to his huge wards, filled with every possible form of malady. He treats disease as we all do. For pneumonia he prescribes quinine and poultices; for rheumatism he gives salicylate of sodium; for phthisis cod-liver oil and phosphates, and so on. But, for many cases, if he thinks it desirable, he adds hypnotism and suggestion.

To the sleepless pneumonic patient, to whom he dares not give opium, he administers hypnotism and suggestion of sleep. The patient mostly responds and sleeps. The rheumatic patient finds relief of his pains, the phthisical of his cough and other distressing symptoms.

In dealing with patients whose ailments are essentially neurotic, he relies mainly on hypnotism. By it he rapidly cures their neuralgias, functional paralysis, hysterical crises, writer's cramp, insomnia, &c., lessens and postpones, and often cures epileptic convulsions and analogous troubles. Of all these effects I speak as an eye-witness.

With dipsomaniacs he suggests the horror of stimulants, and in

a large proportion of cases, when they awaken, there remains a fixed dislike of what previously had been their absorbing passion. These cases of alcoholism offer the most remarkable and satisfactory cures under treatment by hypnotism. In many other vicious habits and mental failures, respecting which it is too common with physicians to overlook the purely physical element, like good results are obtainable by hypnotism.

M. Bernheim does not for a moment pretend that hypnotism can cure organic disease, such as cancer, phthisis, paralysis from cerebral effusion, with destruction of motor centres; but even in such cases it relieves the most distressing symptoms, and even modifies organic changes in a very curious manner. The special field for treatment by hypnotism is non-organic functional disease, and we all know how rebellious to ordinary medication these ailments often are. Strange as it may appear at first sight that psychical influence can modify organic conditions, a little reflection prepares us to find such the fact. We all know how markedly digestion, assimilation, and nutrition are influenced by mental conditions. Should not this prepare us for much more?

M. Bernheim's method of hypnotising differs slightly from that of Liébault. He relies mainly on *suggestion*. Looking intently at the patients, he "commands" them to sleep. Nearly all succumb rapidly; then he closes their eyes, pressing the eyeballs gently, and tells them to sleep on until he comes back to waken them. As I have seen, they usually sleep until he bids them waken.

That the sleep is real is quite manifest, for the insertion of a needle through the skin of the arm or back of the hand does not rouse them if they enter the third or subsequent degrees, and when awakened, they look with wonder at the tender bleeding puncture.

I do not think that M. Bernheim's method is available for most persons. It needs great experience, such as his, and a certain power of will and influence on the part of the operator. Usually it is needful to *tire out* the patient's senses, be it the sight or hearing, by a monotonous stare at a bright object, or by listening to a continued sound, adding *then* the suggestion of sleep. This is the method which I have found effectual in my own practice. Doubtless, if I had the experience and power of Dr. Bernheim I might succeed as he does.

Like Dr. Liébault, Dr. Bernheim is delighted to see visitors, and

profuse in his attention to them. After a short time he taught me to hypnotise, and allowed me to operate on his patients before the class. I soon made the observation, which I confirmed in Paris, that operators vary a good deal in their power. Some succeed at once, others more slowly, and a few fail altogether. Patience, kindness, and a firm will appear indispensable.

It would occupy hours if I were to describe even a fraction of the cases which I saw and noted in M. Bernheim's wards during my stay at Nancy. I shall not attempt to trespass on your patience by so doing, but trust you will allow me to give some details of a few.

The first I shall select exemplifies the power of hypnotism in relieving distressing symptoms in a case of organic disease, and, moreover, illustrates that very curious state known as *somnambulism*, which occurs in the fifth and sixth degrees of hypnosis, as classified by Liébault. The patient was a man aged forty-two, a soldier discharged from the army, owing to disease of the aortic valves, or, as M. Bernheim correctly termed it, "la maladie de Corrigan." The ailment was not far advanced, and the patient's troubles were mainly insomnia and dyspnœa. Hypnotism, with suggestion of sleep and facility of respiration, gave marked relief, and was repeated whenever the effect wore off. This patient proved a very susceptible subject, and slept profoundly, developing the condition of somnambulism. One day, M. Bernheim said to me, "I will now show you a somnambulist." The patient being profoundly hypnotised, M. Bernheim suggested to him as follows—"Sleep for ten minutes, then get up, walk across the ward to bed No. 15, take the night-cap of the patient there, place it under your own pillow, then open the window, and you will hear music." We left the man sleeping. In just ten minutes he rose, crossed the ward slowly and carefully, his eyes being closed, took the night-cap from bed No. 15, brought it over, and placed it under his own pillow. Then he went to the window, threw it open and leant out. His face now expressed the keenest delight, and he remained standing until M. Bernheim awoke him by blowing on his eyelids. When questioned about the night-cap under his pillow he was utterly astonished, knew nothing about it, and when asked why he stood at the open window, replied, "I thought I was back with my regiment, and that the band was playing."

His sleep being profound—somnambulistic in fact—he had not the faintest recollection of the suggestion which caused him to go

through the evolutions described. This was one of many similar cases which I witnessed in the services of Drs. Bernheim and Liébault.

I shall now describe a case of cure of a fixed neuralgia of long duration, accomplished by hypnotism and suggestion.

One morning, while on his rounds, M. Bernheim found a new patient just received into hospital. He was a bronzed, weather-beaten man of some fifty to fifty-five years of age—a workman in one of the iron foundries which abound near Nancy. He complained of a fixed pain in the region of the right false ribs, over the liver. This pain had come on suddenly about a year before, while he was making great exertion in lifting a heavy bar of iron. It was constant, disabled him from working, undermined his health, and had reduced him to poverty. He had undergone much treatment, and the affected region bore evidence of severe counter-irritation in the cicatrices caused by the actual cautery, of which our Gallic brethren are so fond. The whole side was so tender that he could barely allow us to examine it.

M. Bernheim said to me across the bed, “I am glad you are here to-day. This is a case in which I expect a very good result from hypnotism.”

He then hypnotised the patient, suggested that on awakening the pain would be better, and at the same time rubbed strongly over the affected parts. In ten minutes he returned and wakened the patient. The pain was gone! The side was so insensible that no complaint was made on vigorous palpation! This patient proved to be a somnambulist. He had no recollection of where he was, or of having ever seen M. Bernheim or me. I asked M. Bernheim what explanation he had to offer of such a marvellous result. He replied, “I can give none satisfactory. If I must propose any, I would say that as the pain was felt in the brain, the cauteries, &c., only fixed it there, and hypnotism has so altered the cerebral condition that sensibility is destroyed.” I had the opportunity of watching the subsequent progress of this case. The pain returned in the evening, but greatly mitigated. A daily repetition of hypnosis gradually extinguished it, and in nine days it was completely gone.

All this sounds like a fairy tale. As it happens, I was able, last month, to relieve by hypnotism and suggestion an almost identical neuralgia of long duration, in a young girl, which had resisted all other treatment. As in Dr. Bernheim's case, the pain returned,

in a mitigated form; but after five repetitions of the hypnosis a full week's perfect relief ensued, and the girl went home. This patient was under the care of my colleague, Dr. Joseph Redmond, at the Mater Misericordiæ Hospital. He will bear out what I state. We have recently ascertained that the cure has been permanent. This is only one of many successes I have had. Dr. Charles FitzGerald tells me that he has cured by hypnotism and suggestion a case of tinnitus aurium when all other remedies failed. Dr. Richard Hayes has also had some remarkable results.

I took an opportunity of inquiring from M. Bernheim his opinion of hypnotism in surgical operations. It was adverse. He told me that in some exceptional cases, especially in superficial operations, it succeeded; but, as a rule, could not replace chloroform or ether. He found that patients went to sleep in such circumstances in terror of the operation, rarely slept well, and were apt to awaken too soon—in fact, that auto-suggestion counterbalanced hypnosis and suggestion.

However, that such is not invariably the case is amply proved by a demonstration given at Leeds, on the 28th of March of last year, by Mr. Milne Bramwell, of Goole, when a number of severe operations were performed under hypnosis, without inflicting the slightest pain. A full account of these will be found in the *Provincial Medical Journal* of May, 1890, together with the marked favourable testimony of Mr. Pridgin Teale, who was present.

Time presses, and I must not tarry. I have drawn a very imperfect sketch of what I saw at Naney, in the services of Drs. Liébault and Bernheim, and must now leave them. When parting, M. Bernheim gave me a few words of advice—kindly and emphatic. He assured me that he had taught me all he could within the limits of a short visit, and that he could teach me no more unless I remained with him for three or four months. “You must now learn,” he said, “the rest by your own experience. Remember, above all, that *suggestion* is the basis of the new departure; you must learn to dominate, by your will and power, those whom you treat. When you can hypnotise them (and with perseverance you can do so with much the greater number), your capacity to benefit your patients will daily grow.”

I not only believe him, but have found untold value in his instructions, and also a solution of much that was previously quite inexplicable. The present time offers no fit opportunity for dilating upon his idea; but I cannot help remarking that it eluci-

dates much that was hitherto mysterious to me—for example, the effects of metallo-therapy, homœopathy, electro-homœopathy, “faith-cure,” and so on. I believe that *suggestion, plus receptivity*, is at the bottom of all.

I regret that from want of time I dare not attempt to open up here the wide field of deeply-interesting study offered by the marvellous effects of suggestion, auto-suggestion, hypnotic suggestion, and post-hypnotic suggestion. The more I have worked at these problems the more convinced I have become that at present we are quite unable to define the power and limit of suggestion, both in medicine and outside of it.^a

From Nancy I betook myself to Paris, and there followed the clinical teaching of M. Luys, M. Auguste Voisin, and M. Guinon. I found each most instructive in its special line.

No one can avoid being struck at once by a very marked difference in the doctrine of hypnotism and suggestion as held at Nancy, and at Paris, especially in the school of M. Charcot.

While the latter leans strongly to the idea that hypnosis is a neuropathic state, including that imperfectly defined group of conditions termed hysteria, the Nancy professors deny this in the main. I confess, from what I saw myself, I lean, on this point, to the doctrine of Nancy. Again, while the Nancy professors hold a very strong view as to the possibility of hypnotism being used for criminal ends, and with success, the Charcot school differs from them, and rather sneers at what it terms “*Les crimes du laboratoire*.” On this point I am led from observation towards the latter view. Thus, it will be observed, each of these schools has its differences and its merits. Later on we shall revert to this very interesting and important subject.

M. Luys’ clinique is very remarkable. He practises hypnotism and suggestion largely, and in addition has introduced a novel and quite peculiar application of these elements. This he terms “*Guérison par transfert*.”

I can best explain this matter by detailing a cure which I saw, and which has since been published in the *Revue d’Hypnologie* of August, 1890.^b A woman, twenty-two years of age, had been sent to M. Luys by one of his colleagues at the Charité Hospital, who had totally failed to cure her by ordinary medication. Four

^a See work by Dr. Moll, of Berlin. English translation published by Walter Scott, London. 1890.

^b Paris. Georges Carré, Éditeur.

months previously, in consequence of a fright, she had become affected by a spastic condition of the lower limbs, which ultimately spread to the arms and back. The thighs and legs were as rigid as a bar of wood, and movement or even standing was impossible. M. Luys said to the class—"In ten minutes I will have this girl walking up and down the ward."

He placed her lying on a wide bed, and alongside of her a subject whom he knew he could easily hypnotise profoundly. All being ready, he made the patient and subject join hands, then he hypnotised the subject, and taking a powerful magnet, such as I now exhibit, passed it repeatedly in a circular direction so as nearly to touch the patient and subject, the positive pole being directed towards them. Within five or six minutes the limbs of the patient were perfectly pliant and under her control, while those of the subject passed into a state of spastic rigidity. Then he commanded the patient to rise and walk about the ward. She did so at once, needing only the arm of an assistant to help her, as she was giddy from long confinement in the recumbent posture. Meantime the subject remained lying on the bed with the lower limbs immovably rigid. Awakening her, M. Luys told her to rise and join the patient. In a few seconds the spastic condition was gone, and she, too, walked about the ward.

In this case, be it remembered, the patient was *not* hypnotised, and yet the cure was complete. I had the opportunity of seeing that it became permanent after a few repetitions of the process described. I should hesitate very much to discredit M. Luys' belief that this was a case of cure "*par transfert*," yet I could not help thinking of M. Bernheim's words, and leaning to the idea that it was rather a cure "*par suggestion*." This mode of "*Guérison par transfert*" is a new departure, and needs wide confirmation before we can accept it as we must the extraordinary cures daily worked by hypnotism and suggestion. It would seem to me needful that such processes should be subjected to extraordinary precaution and watchfulness, to guard against the possibility of their being dominated by mere suggestion, ere we accept unreservedly the doctrine of "*transfert*." Many other details of M. Luys' demonstrations seemed to me to require similar safeguarding and precaution. Withal, his *eliquie* is most interesting—his lectures especially so—and well worthy of attention. To him we are indebted for the introduction of hypnotism in obstetrical practice. He discovered that if a patient is trained to hypnosis by a few

séances previous to confinement, it is only needful when labour comes on to send her to sleep, and the entire process goes on painlessly. Dr. Kingsbury, who is present here, has recorded a successful case of this nature in the *British Medical Journal* for February 28th, 1891.

I should mention that M. Luys' mode of inducing hypnosis is different from that adopted by most other specialists. He relies mainly on "fascination" by a rotatory mirror. Placing the patients in the recumbent posture on a couch or arm-chair, he makes them stare intently at a revolving mirror, such as I now exhibit, situated at a distance of from twelve inches to a few feet. After about five minutes most succumb. This method has the advantage of saving the operator from fatigue, which is not inconsiderable when a fixed stare is used to tire out the sense of sight. It is further interesting by showing how erroneous it is to suppose that there is any magnetic influence at work in hypnotism, or indispensable influence of one individual over another.

Now, let me ask you to follow me to the Salpêtrière Hospital, where M. Auguste Voisin uses hypnotism, with enormous success, in the treatment of the poor lunatic inmates. I say enormous success advisedly; for whenever he is able to hypnotise these poor creatures—which is very difficult, and often impossible—the results are marvellous. It is a most profitable study to witness his wonderful patience and indomitable perseverance. The first case upon which I saw him operate was a young woman who, on admission, was permanently maniacal. By repeated steady efforts he ultimately succeeded in inducing hypnosis, with the result that, by suggestion, he cured her delusions, and only at special periods the least excitement recurred. At the time of my visit one of the crises was at hand, and I witnessed his process of inducing sleep, which, once produced, lasted an hour, and then left her perfectly tranquil. The poor girl was quite unwilling to be hypnotised, and this was the first instance in which I saw a patient hypnotised against consent—a wholly exceptional event. M. Voisin placed her in bed, and "stared" her to sleep. At first she resisted so violently that it required three nurses to hold her. Failing at the onset, he overcame physical resistance by a few whiffs of chloroform, and then succeeded in inducing complete and prolonged sleep.

The next patient was a woman who had been a confirmed dipsomaniac, and lost her reason thereby. By repeated hypnotism and

suggestion M. Voisin not alone cured her of the mania, but also of her evil propensity. Nothing would induce her to touch a stimulant.

This case made a very strong impression on me, which has, as we shall see, led to a similar cure in my hands and those of my friend, Dr. J. J. Murphy, who will tell you the story himself.

Again, M. Voisin hypnotised a patient who was in process of cure of mania, and as she had a strumous knee, with effusion, he took the opportunity of firing the diseased part with the actual cautery, *but without waking her*. He showed me another violent maniac whom he had hypnotised a week before, and *kept asleep*, awakening only when the nurse brought her food, and made her rise for needful wants. He told me that whenever he was able to accomplish this feat—of keeping a patient asleep for ten or fifteen days—the improvement in the mental condition was most remarkable.

He showed me another case, an out-patient, a young girl with incipient mania with delusions, in whom, by repeated hypnosis and suggestion against the delusions, he had aborted the attack. He assured me that he had been most successful in such instances.

M. Voisin has published in the *Revue de l'Hypnotisme*^a for March last a very remarkable paper, in which he shows the result of urinary analysis in a case in which he induced this prolonged sleep. The results at which he arrives, and upon solid grounds, are:—

1. That nutrition is not disturbed in hypnotic sleep.
2. That hypnotism is not a pathological state.
3. That hypnotism is a therapeutic agent which we may use without risk to the nutrition of the patient.

Time forbids me from giving further details of all I saw in M. Voisin's most remarkable and interesting clinique; but I would suggest to all interested in the subject to read two papers—one is M. Voisin's Memoir, in the "Comptes Rendus" of the International Congress on Hypnotism, held in Paris during August, 1889, pages 147 to 157;^b and the other is a very graphic account of a visit to his wards, published in the *Tablet* of June 14th, 1890.

My visit to M. Charcot's wards in the Salpêtrière was comparatively short, and although I had the advantage of seeing there many rare cases of disease of the nervous system, including a

^a Rédaction. No. 40 bis, Rue de Rivoli, Paris.

^b Paris : Octave Doin. 1890.

typical instance of hystero-epilepsy in a young man, I did not witness there much treatment by hypnotism.

Thanks to the special kindness of M. Georges Guinon—M. Charcot's chef de clinique—I had the opportunity of examining one remarkable somnambulist, to whose case I shall later allude.

It is of vital importance now that we should consider the objections which may be raised against hypnotism.

These may be classified into—

(a). Those of a physical nature, and

(b). Those based on moral grounds.

(a). As regards the former, we have the evidence of experts of large experience, such as Liébault, Bernheim, Luys, and Voisin, and they assure us that such objections are groundless.

If accidents have arisen it was only in the hands of unskilled, non-medical operators. So far as I am aware, no case has been recorded of injury to a patient's health where hypnotism was used by a skilled physician.

Dr. Nolan, Senior Assistant Medical Superintendent at the Richmond District Lunatic Asylum, in the *Journal of Mental Science*, Jan., 1891, records a case of "Stuperose Insanity consecutive to induced Hypnosis." I think anyone who reads this very interesting paper will agree with me that the subject, from the great injury inflicted on his nervous system by a very dissipated and irregular life, as well as from his family history, was a very likely subject indeed for an attack of insanity. Moreover, the hypnosis to which he was subjected was induced by a wholly unskilled and unscientific person.

My friend, Dr. Hadden, of Grosvenor-road, Rathmines, told me of another case, which he saw, where an attack like brain fever ensued after hypnosis. Here again the operator was an individual totally ignorant of the subject—a young friend of the patient. In this case, as in the former, the hypnotism was induced as an experiment, without any curative end in view. A similar misadventure is recorded in the *British Medical Journal* for March 28th, 1891. The conclusion which I would deduce from these cases is—that it is highly improper, and possibly dangerous, for anyone who is not an educated physician, and familiar with the practice, to attempt hypnotism, and that it should never be induced without due reason, precaution, and design. M. Bernheim^a dwells

^a See page 575 and following of his *Essay*, already quoted, Second Edition, dated 1888. Paris: Octave Doin.

strongly upon this point. I need hardly add as a corollary to the foregoing—that all public exhibitions of hypnotism are essentially objectionable, and possibly hazardous and demoralising, and that they should be prevented (as they are in many countries) by stringent law and heavy penalty.

Besides baseless objections on the score of injury to the health of the subject, many absurd difficulties are raised by the thoughtless. We are told by some that hypnotism is not new. I grant it, and would remind these wiseacres of the words of Ecclesiastes—“The thing that hath been, it is that which shall be, and that which is done is that which shall be done, and there is no new thing under the sun.” Nevertheless there *is* a new departure in modern hypnotism—the hypnotism of Liébault—namely, the combination of *suggestion with induced sleep*.

Again we are told that hypnotism is incomprehensible. This might need reply if anything else in Natural Science was comprehensible, but we know it is not. The ringing of an electrical bell can be easily demonstrated up to the point when we are asked why a current of electricity passing round a piece of iron converts it for the time into a magnet. Of that we know no more than we do why the earth goes round the sun. So of hypnotism.

It is further objected that hypnotism is useful only in affections of the nervous system. My reply is simple. In the first place, the charge is *untrue*; and secondly, *if it were true*, it would bear strongly in favour of hypnotism, because these very ailments are avowedly the most rebellious to ordinary medical treatment.

(b). Passing on to the objections which may be urged against hypnotism upon the score of morality, I feel that I tread upon very delicate ground. There is no doubt that it is a very serious matter to submit our free will to the domination of another, and, as it were, to confide ourselves into his hands. Nevertheless we freely consent, without hesitation, to do this every day when we take anæsthetics—such as nitrous oxide gas, chloroform, methylene, or ether. The reason we do not shrink is because we always make sure to entrust ourselves to those in whom we have full confidence. Why should not the same precaution justify us in submitting ourselves, or our patients, to hypnotism?

Even granting—which I do—that the surrender of will and action in hypnosis is greater than in the case of ordinary anæsthetics, the decision must be similar, and is summed up in one advice: “Take care whom you allow to hypnotise you.”

Bernheim lays down three rules which seem to include all needful precaution on the part of the hypnotiser. Let me quote them :—

(1st). Never hypnotise any subject without his formal consent, or the consent of those in authority over him.

(2nd). Never induce sleep except in the presence of a third person, in authority, who can guarantee the good faith of the hypnotiser and the subject. Thus any trouble may be avoided in the event of an accusation, or any suspicion of an attempt which is not for the relief of the subject.

(3rd). Never give to the hypnotised subject, without his consent, any other suggestions than those necessary for his cure. The physician has no rights but those conferred upon him by the patient. He should limit himself to the therapeutic suggestion; any other experiment is forbidden him without the formal consent of the patient, even if it be in the interest of science. The physician should not profit by his authority over the patient in order to obtain this consent if he thinks that the experiment which he wishes to perform may have the slightest harmful effect.

Speaking as an Irish physician, I say, with confidence, that the cases in which the power of hypnotism and suggestion are likely to be abused are so problematical as not to constitute a valid objection. Nay, more, the very dangers which, in evil hands, might arise, should impel all those who wish to use this potent remedy honestly, and for the highest ends, to take up its study and practice, and carry it out with due honour and fidelity to a great trust.

Satisfied, as I now am, that hypnotism is a reality, a great means towards cure, one which can never be crushed by ignorant and baseless criticism, I believe that it is our duty—imperative duty—to do it justice, and rescue it from the hands of charlatans. *As we use it, it will be good or evil.*

It has been argued that, in actual reality, a hypnotised subject falls permanently under the dominion of the hypnotiser, and may be made to act criminally by his suggestion. From what I have seen myself I think this idea has been hugely exaggerated. In the first place, if such should ever arise, the suggestions must have been criminal—the very event which we should carefully obviate in every possible way. Granting that criminal suggestions have been made (and then we know where the wrong lies), there is ample evidence to show that conscience, even dormant as it is in hypnosis, is not extinguished, and the evil suggestions will be resisted and

rejected if the conscience of the hypnotical subject is opposed to them. Let me quote a case in point. I mentioned that I had examined a typical somnambulist in the service of M. Charcot, shown to me by M. Guinon. During the somnambulistic state M. Guinon urged this girl to stab one of the class there present, and placed in her hand a mock dagger. She approached the student, looked intently at him, hesitated, then turned away and threw down the dagger. Even in somnambulism her conscience predominated.

Apropos to this matter, I may record a case in which I saw M. Bernheim endeavour to elicit from a somnambulist his "political opinions." After prolonged cross-examination the patient declined to reveal them, and, folding his arms, said, "*C'est mon affaire.*"

What a remarkable contrast to the awkward confessions occasionally volunteered under the influence of chloroform and ether.

Certain it appears that if criminal suggestions are ever made, *which they should not be*, it remains for the dormant conscience of the subject, whatever it may be, to accept or reject them. This point might lead me, if time permitted, to show how unnecessary it is to drag hypnotism into the domain of crime. It is quite too much the fashion now-a-days to put down all evil influences manifested to hypnotism. This is not unnatural, though baseless. There is something so extraordinary and weird in the phenomena of hypnotism that it seems quite in accordance with the bias of the superstitious and ignorant mind to imagine its presence where it does not exist, and even to exaggerate its powers in a grotesque fashion.

Lately a remarkable illustration of this tendency occurred in Paris, in the famous "Eyraud-Bompard affair."

Michel Eyraud, with the aid of his female accomplice, Gabrielle Bompard, murdered and robbed their victim, M. Gouffé, under circumstances of extraordinary cold blood and atrocity. The facts were beyond doubt, but a vigorous effort was made by the counsel for Bompard to exonerate her, despite her very evil reputation, on the ground that she was under the hypnotic influence of Eyraud, and therefore irresponsible. It was well known, be it remembered, that Bompard was a hypnotic subject. The case was argued with great skill between the representatives of the Nancy and Paris schools, and the result was exactly in accordance with the views I have learned to adopt. The French jury, probably the most impressionable and emotional possible, rejected the plea of

hypnotic influence, and condemned Bompard to 20 years' penal servitude. Probably, if she had not been a very pretty and attractive young woman, they would have sent her to the scaffold with Eyraud. This case proves conclusively that even in France, where the views concerning the power of hypnotic suggestion are held in an extreme form, the common sense of the jury prevailed. This is just as it should be. There was no need to import hypnotism into the case at all. The history of the world from the earliest periods demonstrates the evil influence of the stronger over the weaker mind, wholly apart from hypnotism, and if I were to select a very remote illustration of this I might point to the charm Eve exercised over Adam, to the ruin of our race, and yet we have no reason to suppose that hypnotism was practised in this instance, unless in the guise of "fascination."

I have lately read a violent diatribe against hypnotism, by the Abbé Touraude, of Alençon.^a While respecting, as I am bound to do, the good intentions of this author, I cannot help thinking that it would have been wise on his part to have studied the subject *deeply and practically* before committing his opinions to paper. His essay, as it stands, though clever, contains much that is stupid, and is an instance of mistaken zeal—that zeal which is certainly *not* "according to knowledge." By skilful extracts and dovetailing of mesmeric and animal magnetic theories and anecdotes, with exceptional facts, quoted from works on hypnotism, as if they were every-day occurrences, he has furbished up a case which may mislead ignorant readers (and the bulk of his readers must be ignorant so far as hypnotism is concerned) to the belief that the whole affair is merely another form of magic, spiritism, and other diabolic interventions. Perhaps the best comment I can make on the Abbé Touraude's book is to quote an incident which occurred to myself. When recently engaged in treating some patients by hypnotism at the Mater Misericordiæ Hospital, an antiquated countrywoman looked askance on the whole proceeding, and finally said to the Sister in charge of the ward, "I think he might try it on me, so I will go to the chapel."

This delicate compliment reminded me that history repeats itself, and that there are still old women, of both sexes.

Now let me add a few words in conclusion. After a somewhat full and careful study of hypnotism, such as may be accomplished

^a L'Hypnotisme, ses Phénomènes et ses Dangers. Par L'Abbé A. Touraude. Paris: Bloud et Barral. 1889.

by reading, I felt in doubt and bewilderment, tintured by a strong element of scepticism. In this frame of mind I went to the centres where it is practised on a large scale, and saw for myself what it is, what it can do, and where it fails. In my humble way, although sorely pressed by other absorbing avocations, I have tried it on a small scale, and with very encouraging results.

I have told you the conclusions to which I have been irresistibly drawn. Let those who would condemn hypnotism, without trial, do as I have done, and then record their verdict.

It seems scarcely philosophical to publish strong opinions upon insufficient evidence, and yet this appears rather the fashion just now. The last illustration of this misplaced zeal is a paper by Mr. Ernest Hart, the able editor of the *Journal of the British Medical Association*, in the issue of March 28th last. Oddly enough, his article appears while an investigation of the subject is actually in progress by a Committee of the said Association.

At all events, opinions matter little. Truth prevails, and Time settles all controversies.



